

## Medication Policy

DISTRICT POLICY ON MEDICATION AT SCHOOL IS AS FOLLOWS:

1. All arrangements are to be made only with the school principal or designated personnel.
2. A signed authorization form is required from the parent(s) or guardian requesting that school personnel administer the medication.
3. The authorization form must be filled out and signed by the student's doctor including the time, date, dosage, name of medication, method of administration and a statement of necessity.
4. A parent/guardian or an authorized adult (**NOT A STUDENT**) **must** bring the medication to school in a container properly labeled by the pharmacist. The label must include name of student, doctor, date, dosage, name of medication and method of administration. Medication improperly labeled on the container cannot be accepted and/or administered to the student. **Students in violation of the Medication Policy may be subject to disciplinary action under the Safe School Policy.**
5. All over-the-counter medications that the school administers will require a prescribing practitioner's statement and parental or guardian consent before administration.
  - A. The medication must be in the original container.
  - B. These drugs will follow the same protocol as prescription medications.
  - C. Use the authorization form for over-the-counter medications.
6. Students in **kindergarten through grade 6** may not self-administer medications except for asthma inhalers, insulin, or epinephrine auto-injectors, i.e. epi-pens. Inhalers, epinephrine auto-injectors, and insulin may be carried on the person. Inhalers, epinephrine auto-injectors, and insulin may be administered by the student in elementary school if the parents and medical provider sign and return the forms to self-administer these medications.
7. Students in **grade 7 through grade 12** may carry one day's dosage of their medication on their person. Inhalers, epinephrine auto-injectors, and insulin may be carried and self-administered by the student if the parents and medical provider sign and return the form to self-administer these medications.

## Elementary Vision and Scoliosis Testing Notification

A vision screening will be given for all students (K-6). Students in 5<sup>th</sup> and 6<sup>th</sup> grade will participate in a scoliosis screening at some time during the year. If you do not want your child to participate in these screenings, please notify the school nurse in writing.